		Effec	live .	per 1, 20	000				09	18	576	28	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS							li	RATE	FEE	OR 7	RATE		
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE			BASIC FEE	FEE	
TOTAL CHARGEABLE CLAIMS			≤ minus 20=					X\$ 9=		1	7040	8€0	
INDEPENDENT CLAIMS			, minus 3 =		·		1		-	OR			
MULTIPLE DEPENDENT CLAIM PRESENT					L		}	X40=	<u> </u>	OR	X80=		
AS per Pre- Arnel							· [+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	860	
CLAIMS AS AMENDED - PART [] (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	^	OTHER		
V		CLAIMS	1400	HIGH	ÆST	(Column 3)	r	JHIALL	ADDI-	OR I	SMALL		
AMENDMENT A		REMAINING AFTER AMENOMENT		PREVI PAID	OUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 4	Minus	. 4	6	<i>=</i> Ø		X\$ 9=		OR	X\$18=		
	Independent	· /	Minus		/_	<u> - 2</u>	lt	X40=	·	OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=			. 270	•	
							L	TOTAL		OR	+270=		
11/29/04 (Column 1) (Column 2) (Column 3)							A	DDIT. FEE		OR .	ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING	49646	HIGH	EST		1 _		ADDI-	1 1		1001	
		AFTER AMENDMENT		PREVIO	DUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	ADDI- TIONAL	
	Total	· 4	Minus	PAID	/)	= ()	I		FEE	·		FEE	
	Independent	. /	Minus	2	?	= 1	I	X\$ 9=		OR	X\$18=		
	FIRST PRESE	NTATION OF MI	JUTIPLE DEF	PENDENT	CLAIM			X40=		OR	X80=		
			_					+135≘		OR	+270́=		
							Α£	TOTAL DOIT, FEE		OR ,	TOTAL ADDIT: FEE		
_	200	(Column 1)		(Colun		(Column 3)			. ,				
MENDMENT C	36	REMAINING AFTER		NUME PREVIO	BER	PRESENT EXTRA		RATE	ADDI- TIONAL	Î	RATE	ADDI- TIONAL	
	Total	AMENDMENT	Minus	PAID	FOR		$ \cdot $		FEE	ŀ		FEE	
	Independent	•	Minus	***		=		X\$ 9=		ОЯ	X\$18=		
	FIRST PRESE	NTATION OF ML			CLAIM			X40=		OR	X80=		
_			•				,	-135=		OA	+270=		
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 enter "20" TOTAL OF											TOTAL DDIT. FEE		
7	he "Highest Num	mper Previously Paid Der Previously Paid	io for in this For (Total or	SPACE is Independe	i less that nt) is the	n 3, enter "3." highest numbe			opriate box				

FORM PTO-075 (Rev. 8/00)